Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements.

2008, and ending 20 For the 2008 calendar year, or tax year beginning D Employer identification number C Name of organization HINDU TEMPLE OF EASTERN SHORE Check if applicable Please use IRS label or Doing Business As 1742824 Address change 52 Telephone number pont of Number and street (or P O. box if mail is not delivered to street address) Room/suite ☐ Name change type. See 125 PARKER ROAD 6034350 Initial return Specific City or town, state or country, and ZIP + 4 Termination Instructions. SALISBURY, MD, 21804 G Gross receipts \$ 121276 Amended return F Name and address of principal officer: Application pending H(a) Is this a group return for affiliates? Yes Rai Sharma , President, Kamal Mandan -Treasurer H(b) Are all affiliates included? Yes Tax-exempt status: √ 501(c) (3)

√ (insert no.)

√ 4947(a)(1) or If "No," attach a list, (see instructions) Website: ▶ H(c) Group exemption number ▶ Type of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: M State of legal domicile. MD Part I Summary 1 Briefly describe the organization's mission or most significant activities: 1)To promote religious, spiritual, cultural activities for those who share Hindu culture 2) To support humanitarian causes and to organize relief efforts Governance 3) to provide funding and other assistance to individuals, families and communities suffering from natural disaster and other hardships 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets. 3 Number of voting members of the governing body (Part VI, line 1a). 12 Number of independent voting members of the governing body (Part VI, line 1b) 4 12 5 1 Total number of employees (Part V, line 2a) 15 6 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from art VIII, line 12, column Nil 7a b Net unrelated business taxable income from Form 890-T, line 34 Nil Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) . OGDEN 104955 117866 13427 3410 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 20340 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 138722 121276 Grants and similar amounts paid (Part IX, column (A), lines 1-3). Benefits paid to or for members (Part IX, column (A), line 4) . . . 22941 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 17131 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 65272 114182 82403 137123 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 19 Revenue less expenses. Subtract line 18 from line 12 56319 15847 End of Year Beginning of Year 666045 649291 20 Total assets (Part X, line 16) . 831 25 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 665214 649266 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Date 10 th N8V. 200 Here Signature of officer Type or pnnt name and title TREASURER MANDAN Check if Date Preparer's identifying number Preparer's (see instructions) signature employed ▶ 🔲 Paid Preparer's Firm's name (or yours EIN **Use Only** if self-employed), Phone no ► (May the IRS discuss this return with the preparer shown above? (see instructions) Yes

Cat No 11282Y

Form 990 (2008)

1 ,	Briefly, describe the organization's mission: Church/Temple	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☐ Yes ☑ N
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☐ Yes ☑ N
1	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount allocations to others, the total expenses, and revenue, if any, for each program service reported.	
la	(Code:) (Expenses \$ 84787 including grants of \$) (Revenue \$ Conducting religious prayers and discourses on Hindu philosophy	
h	(Code:) (Expenses \$including grants of \$) (Revenue \$	<u> </u>
_		
	•	~
_	(Code:) (Expenses \$	
C	(Code) (Expenses \$ including grants of \$) (Revenue \$))
		·
kd	Other program services. (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ \$ 84787 (Must equal Part IX, Line 25, column (B).)	

Pai	t IV Checklist of Required Schedules			
			Yes	No
1 ,	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		/
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.	5		1
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	:	1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	1	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		/
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19 20	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	_	1
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J.	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K. If "No," go to question 25.	24a	-	1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		✓
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		1
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1

Form **990** (2008)

Fal	Statements Regarding Other IRS Filings and Tax Compliance			
	•		Yes	No
1a,	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	į		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			,
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3 <u>b</u>		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		√
b	If "Yes," enter the name of the foreign country: ▶	_		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		,	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>	<u> </u>	V
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5</u> b		✓
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	Did the organization solicit any contributions that were not tax deductible?	6a	<u> </u>	1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			l
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		1
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	/
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	✓
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	 8		1
9	organization, have excess business holdings at any time during the year?			Ť
а	Did the organization make any taxable distributions under section 4966?	9a		1
	Did the organization make a distribution to a donor, donor advisor, or related person?.	9b		1
10	Section 501(c)(7) organizations. Enter:]
а	Initiation fees and capital contributions included on Part VIII, line 12	ı	}	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			.
11	Section 501(c)(12) organizations. Enter:			1
			} ·	1
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12a	<u> </u>	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Seç	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	-		
b	Enter the number of voting members that are independent	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	_2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			,
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		√
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓ _
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	✓	
6	Does the organization have members or stockholders?	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7.	,	
	of the governing body?	7a	<u>v</u>	1
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	_7b		_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	,		İ
•	the year by the following:	(ſ	
	The governing body?	_ <u>8b</u>	1	
	Does the organization have local chapters, branches, or affiliates?	9a		1
		30		
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations		,	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		,
Sec	tion B. Policies			<u> </u>
<u> </u>	uon B. Policies		Yes	No
		12a	Yes	No 🗸
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Yes	No ✓
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		Yes	
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	Yes	
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13		Yes	
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b	Yes	
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c	Yes	
12a b c	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13	Yes	
12a b c	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13	Yes	
12a b c 13 14	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13	Yes	
12a b c 13 14 15	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14	Yes	
12a b c 13 14 15	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?	12b 12c 13 14	Yes	
12a b c 13 14 15	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	12b 12c 13 14 15a 15b	Yes	✓ ✓
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14		
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b		✓ ✓
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b		✓ ✓
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12b 12c 13 14 15a 15b		✓ ✓
12a b c c 13 14 15 a b 16a b	Does the organization have a written conflict of interest policy? If "No," go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? **tion C. Disclosure**	12b 12c 13 14 15a 15b		✓ ✓
12a b c c 13 14 15 a b Sec 17	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure	12b 12c 13 14 15a 15b		✓ ✓
12a b c c 13 14 15 a b 16a b	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(context) and context in the policy or procedure required to be filed None	12b 12c 13 14 15a 15b		✓ ✓
12a b c c 13 14 15 a b Sec 17	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? **Tion C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cavallable) for public inspection. Indicate how you make these available. Check all that apply.	12b 12c 13 14 15a 15b		✓ ✓
12a b c c 13 14 15 a b Sec 17 18	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply.	12b 12c 13 14 15a 15b 16a 16b	only)	✓ ✓ ✓
12a b c c 13 14 15 a b Sec 17	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	12b 12c 13 14 15a 15b 16a 16b	only)	✓ ✓ ✓
12a b c c 13 14 15 a b Sec 17 18	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Does the organization have a written document retention and destruction policy? Does the organization have a written document retention and destruction policy? Does the organization have a written document retention and destruction policy? Does the organization because of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict policy, and financial statements availa	12b 12c 13 14 15a 15b 16a 16b	only)	✓ ✓ ✓
12a b c c 13 14 15 a b Sec 17 18	Does the organization have a written conflict of interest policy? If "No," go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	12b 12c 13 14 15a 15b 16a 16b	only)	✓ ✓ ✓

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Positi	on (d	chec	c all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
None			<u> </u>		\vdash					
			<u> </u>		L					
						_				
				Γ						

(A)	(B)				~ .		1	(5)				
Name and title	Average	(C) Position (check all that ap					oly)	(D) Reportable	(E) Reportable	E:	(F) stimate	d
•	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com f org an	nount of other spensation the ganization d relation	tion e on ed
None												
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	-											
	-											
	-											
1b Total	<u> </u>	L		L	L.	L				+-		
2 Total number of individuals (including the	se in 1a) wh					e thar	า \$1	00,000 in repo	ortable compens	ation	from	the
organization ▶									- 			
O Dilate and the Park											Yes	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete							oye		compensated	3	٠- ١	1
4 For any individual listed on line 1a, is the							i and					
the organization and related organizations	s greater tha	ın \$1	50,0	000?	If "	'Yes,'	co/	mplete Schedu	le J for such	4		-
<i>individual</i>.5 Did any person listed on line 1a receive services rendered to the organization? If	or accrue	com	pen	sati	on t	from	any	unrelated org		5		· /
Section B. Independent Contractors	res, comp	Jiele	OCI	ieu i	<i>iie</i> 0	101 3	SU CIT	person .	· · · · · · · · · · · · · · · · · · ·			
1 Complete this table for your five highest compensation from the organization.	compensate	d ind	ере	ende	ent o	contra	acto	rs that receive	d more than \$1	00,00	0 of	
(A) Name and business a	ddress							(B) Description of s	ervices	(Compe	C) ensatio	
None												
					_							
							-					
					_		+-					
2 Total number of independent contractors	s (including	those	in	1) v	vho	recei	ved	more than \$1	00,000 in			

Part	VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s, grants amounts	b	Federated campaigns 1a 0 Membership dues 1b 0 Fundraising events 1c 0		10101100		-
a if	d	Fundraising events 1c 0 Related organizations 1d 0 Government grants (contributions) 1e 0			<u> </u>	
Contributions, gif and other similar	f	All other contributions, gifts, grants, and similar amounts not included above 11 117866				
Con		Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	117866		,	'
		Business Code				
Service Revenue	2a b					
	d					
Program	f g	All other program service revenue . Total. Add lines 2a-2f ▶				
ı	3	Investment income (including dividends, interest, and other similar amounts)	6733			6733
	5	Income from investment of tax-exempt bond proceeds Royalties				
		Gross Rents Less: rental expenses		,		
		Rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory (i) Securities (ii) Other 62965	-	. '		
		Less: cost or other basis and sales expenses 66388 Gain or (loss) (3423)			, ,	
i		Gain or (loss)	(3423)			(3423)
Revenue	8a	Gross income from fundraising events (not including \$,	
Other Reve		See Part IV, line 18				
		Gross income from gaming activities. See Part IV, line 19	,			
		Less: direct expenses b Net income or (loss) from gaming activities ▶				
		Gross sales of inventory, less returns and allowances a			,	,
		Less: cost of goods sold ▶ Net income or (loss) from sales of inventory ▶				· .
		Miscellaneous Revenue Business Code				, ,
	b		 			
		All other revenue				
		Total. Add lines 11a–11d ► Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,	 	, , , , , , , , , , , , , , , , , , , ,		
		9c, 10c, and 11e				121176

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	All other organizations must complete col	ullin (A) but are not	required to com		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				•
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	18,000	18000		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	3564	3564		
10	Payroll taxes	1377	1377		
11	Fees for services (non-employees):				
	Management				
	Legal				
C	Accounting	850	850		
d	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	2565	2565		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	1430	1430		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	17152	17152		
23	Insurance	2258	2258		
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together		,		
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Power	11676	11676		
þ	Repair & Maint	11328	11328		
С	Program Expenses	5876	5876		
d	Religious Prayer related expenses	4928	4928	·	
е	Cleaning and Supplies	3784	3784		
f	All other expenses Change in FMV of Invest	52335	52335		
<u>25</u>	Total functional expenses. Add lines 1 through 24f	137123	137123		
26	Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
		•	(A) Beginning of year		(E End o	s) f year	
	1	Cash—non-interest-bearing	86794	1		100	6417
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		-	-
S	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
As	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost basis 10a 707188					
	b	Less: accumulated depreciation. Complete Part VI of Schedule D 332244	361400	10c		37	4944
	11	Investments—publicly traded securities	217851	11		16	7930
	12	Investments—other securities. See Part IV, line 11		12			
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	200045	15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	666045			64	9291
	17	Accounts payable and accrued expenses	831	17 18			25
	18	Grants payable		19			
	19	Deferred revenue		20			
S	20	Tax-exempt bond liabilities		21			
Liabilities	21 22	Escrow account liability. Complete Part IV of Schedule D			<u> </u>		
Ei a		employees, highest compensated employees, and disqualified		22			-
		persons. Complete Part II of Schedule L		23			
	23	Secured mortgages and notes payable to unrelated third parties		24			
	24	Unsecured notes and loans payable	·	25	·-		
	25 26	Total liabilities. Add lines 17 through 25	831	26			25
-se		Organizations that follow SFAS 117, check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets	665214	27		64	9266
Bal	28	Temporarily restricted net assets		28			
٦	29	Permanently restricted net assets		29			
or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				_	
ţ	30	Capital stock or trust principal, or current funds		30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32			
Š	33	Total net assets or fund balances	665214	33			9266
	34	Total liabilities and net assets/fund balances	666045	34	<u> </u>	64	9291
Pa	rt XI	Financial Statements and Reporting				W = =	
						Yes	No
1		ounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual			2a		
		te the organization's financial statements compiled or reviewed by an ind			Ob.		1
		te the organization's financial statements audited by an independent accuracy to linear 2s or 2b does the organization being a committee that accuracy				<u> </u>	-
С		es" to lines 2a or 2b, does the organization have a committee that assumes audit, review, or compilation of its financial statements and selection of an in				1	
32		audit, review, or compilation of its financial statements and selection of an in a result of a federal award, was the organization required to undergo an				· -	
56		Single Audit Act and OMB Circular A-133?					✓
b		'es," did the organization undergo the required audit or audits?					

.... ·

2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L. 6 Receivables from other disqualified persons (as defined under section 4958(n)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L. 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation. Complete Part IV of Schedule D 11 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 17 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Complete Part IV of Schedule D 27 Organizations that follow SFAS 117, check here 2 and complete Ilines 27 through 29, and lines 33 and 34.	Pa	rt X	Balance Sheet					
2 Savings and temporary cash investments			•	(A) Beginning of year				
2 Savings and temporary cash investments		1	Cash—non-interest-hearing	86794	1		106	6417
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4956(f)(1) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventores for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation. Complete Part IV of Schedule D 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 11 Investments—proprial through 15 (must equal line 34) 18 Grants payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 21 Escrowa account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Other liabilities. Complete Part IV of Schedule D 26 Total liabilities and to not follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 26 Total liabilities and not assets 27 Organizations that do					2			
A Accounts receivable, net S Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L S S Schedule L S S S S S S S S S					3			
8 Receivables from current and former officers, directors, rustees, key employees, or other related parties Complete Part II of Schedule L. 8 Receivables from other disqualified persons (as defined under section 4958()(1)) and persons described in section 4958()(3)(B). Complete Part II of Schedule L. 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation. Complete Part IV of Schedule D 11 Investments—publicy traded securities. See Part IV, line 11 12 Investments—building traded securities. See Part IV, line 11 13 Investments—building traded securities. See Part IV, line 11 14 Intargible assets. 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses. 831 17 18 Grants payable 19 Deferred revenue. 20 Tax-exempt bond liabilities 21 Escriva account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, injohest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, linghest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, linghest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and sons payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Officer liabilities. Add lines 17 through 25 26 Total liabilities and diines 17 through 25 27 Total liabilities. Add lines 17 through 25 28 Total liabilities and fains 1 through 25 30 Capital stock or trust principal, or current funds 31 Total net assets or fund balances 31 Total net assets or fu		_			4			
6 Receivables from other disqualified persons (as defined under section 4958(p(1)) and persons described in section 4958(p(3)(8). Complete Part II of Schedule 1. 7 Notes and loans receivable, net 7 7 Notes and loans receivable, net 7 8 Inventiones for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost basis 10a 707188 b Less: accumulated depreciation. Complete Part IV of Schedule D 10b 332244 361400 10c 374 11 Investments—publicly traded securities 2 177851 11 157 12 Investments—program-related See Part IV, line 11 1 12 13 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15		_	Receivables from current and former officers, directors, trustees, key		5			
17 Notes and loans recevable, net 9 18 Inventories for sale or use 9 9 19 19 10 10 10 10		6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		6	-		
10a	ts	7			7			
10a	sse	8			8			
10a Land, buildings, and equipment: cost basis 10a 707188 b Less: accumulated depreciation. Complete Part VI of Schedule D 332244 381400 10c 374 11	ğ	9	Prepaid expenses and deferred charges		9			
b Less: accumulated depreciation. Complete Part VI of Schedule D Part VI of Schedule D 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Secured mortgages and notes payable to unrelated third parties 23 Secured notgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Pet II Pet the organization's financial statements complied or reviewed by an inde		10a	Land, buildings, and equipment: cost basis 10a 707188					
1 Investments—publicly traded securities See Part IV, line 11 12 12 13 14 14 14 14 14 14 14	i	b	Less: accumulated depreciation Complete					
1 Investments—publicly traded securities See Part IV, line 11 12 12 13 14 14 14 14 14 14 14			Part VI of Schedule D				_	<u> 4944</u>
13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 15 Other assets. See Part IV, line 11 15 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 666045 16 649 17 Accounts payable and accrued expenses 931 17 18 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable 24 Unsecured notes and loans payable 25 26 Total liabilities. Add lines 17 through 25 831 26 25 26 Total liabilities. Add lines 17 through 25 831 26 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 29 20 20 20 20 20 20		11	Investments—publicly traded securities		-		<u> 167</u>	7930
14 Intangible assets 14 15 15 16 16 16 16 16 16		12						
15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 666045 16 649 17 Accounts payable and accrued expenses 831 17 18 Grants payable 18 19 Deferred revenue 919 20 20 Tax-exempt bond liabilities 20 21 Escrow account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable 24 25 Other liabilities. Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 831 26 27 Unrestricted net assets 92 28 Temporarily restricted net assets 92 29 Permanently restricted net assets 92 29 Permanently restricted net assets 92 29 Permanently restricted net assets 93 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 30 Capital stock or trust principal, or current funds 32 Retained earnings, endowment, accumulated income, or other funds 32 Total liabilities and net assets/fund balances 666045 34 649 28 Were the organization's financial statements compiled or reviewed by an independent accountant? 19 Were the organization's financial statements audited by an independent accountant? 2a Were the organization's financial statements audited by an independent accountant? 2b Were the organization's financial statements audited by an independent accountant? 2b Were the organization's financial statements audited by an independent accountant? 2c b Were the organization's financial statements audited by an independent accountant? 2c b Were the organization's financial statements audited by an independent accountant? 2c b Were the organization's financial statements and selection of an independent accountant? 2c b were the organization's financial statements and selection of		13	Investments—program-related. See Part IV, line 11		-			
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1 Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?				666045	34		043	<u> </u>
1 Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Pe	irt XI	Financial Statements and Reporting				Vac	No
b Were the organization's financial statements audited by an independent accountant?	1	Acc	ounting method used to prepare the Form 990: 🗹 Cash 🛚 🗆 Accrual	☐ Other		-	res	NO
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?			·		t?		\vdash	√
the audit, review, or compilation of its financial statements and selection of an independent accountant?			•			2b		✓
the addit, review, or compliation of its illiancial statements and selection of an independent accountant:	C							
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	_	the a	audit, review, or compilation of its financial statements and selection of an in	dependent accountant	[7]	∠C		
the Single Audit Act and OMB Circular A-133?	3a	AS a	a result of a federal award, was the organization required to undergo an Single Audit Act and OMB Circular A-133?	audit of audits as set	i iortii in	32		1
b If "Yes," did the organization undergo the required audit or audits?	b		· ·					

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

HIN	DU	TEMPLE OF	EASTERN SHO	RE					52	1	74282	4	
Pa	rt I	Reason	for Public Ch	arity Status (All or	ganizatio	ons mus	t comple	ete this	part.) (se	e instru	ctions)		
The	orga	anization is n	ot a private foun	dation because it is:	(Please c	heck onl	y one org	ganızatio	n.)				
1				rches, or association			ribed ın s	section 1	70(b)(1)(A	4)(i).			
2				on 170(b)(1)(A)(ii). (Att		•							
3		•	•	nospital service organ									
4		hospital's na	ame, city, and st										·
5			ion operated for (b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or uni	versity ov	wned or o	perated	by a gove	ernmenta	l unit d	escrib	ed in
6		A federal, st	ate, or local gov	ernment or governme	ental unit	describe	d in sect	ion 170(b)(1)(A)(v)	١.			
7				/ receives a substantia (1) (A)(ví). (Complete F		its suppo	ort from a	governn	nental uni	t or from	the ger	neral p	ublic
8		A communit	y trust described	d in section 170(b)(1)	(A)(vi). (C	Complete	Part II.)						
9				receives: (1) more that									
				ed to its exempt funct									
				ent income and unre after June 30, 1975.						511 tax) from	busin	esses
40								-					
10 11	\vdash			nd operated exclusive									
''	ш			and operated exclusive blicly supported organ									
				at describes the type									0
		a 🗌 Type				e III–Fun					Type		her
е		By checking	this box, I cert	of that the organizat	ion is no	t control	led direc	tly or inc	directly by	y one or	more o	disqua	alified
				n managers and other	r than on	e or more	publicly	supporte	ed organiz	ations de	escribe	d in se	ection
			section 509(a)(2)										
f				a written determinati	on from	the IRS	that it is	a Type	I, Type II,	, or Type	lll sup	porti	ng _
		•	, check this box										
g		following per		the organization acce	epted any	gift or c	ontribution	on from a	any of the	•			
				r indirectly controls, e	sithor alo	no or too	other uni	h naraar	a docomb	and in (ii)		Yes	No
				ning body of the supp				in persor	is descrit	eu in (ii)	11g(i)		
				rson described in (i) a		gumzano					11g(ii)		
				of a person described		(ii) above	?				11g(iiı)		
h		Provide the	following informa	ation about the organ	izations t	the organ	ization s	upports.					
(i)		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		ou notify	(vi) i organizal	s the		Amount	of
	0.6	janization		above or IRC section		dacument?		of your	(i) organi	zed in the	j	upbort.	
				(see instructions))	Yes	No	Yes	No No	Yes	No			
					103	1.0	103		103				
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Pa	Support Schedule for Org (Complete only if you chec					and 170(b)(1	I)(A)(vi)
Sec	tion A. Public Support	<u></u>		<u> </u>			
•	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not						
2	Include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
5	Total. Add lines 1-3	,					
<u>-6</u>	Public support. Subtract line 5 from line 4.	<u> </u>	L.,	<u> </u>		<u> </u>	<u> </u>
	tion B. Total Support	4 1 0004		1		1	T .==
Ca	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 .	· · · · · · · · · · · · · · · · · · ·	<u>t</u>	<u> </u>	<u> </u>	2, 7,	L
12	Gross receipts from related activities, etc	•				12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re .	<u> ,</u>	nd, third, fourth			on 501(c)(3)
	tion C. Computation of Public Su					т	
14	Public support percentage for 2008 (line			1, column (f))		14	<u>%</u>
15 16a	Public support percentage from 2007 Sci 33% % support test—2008. If the organi and stop here. The organization qualifies	zation did not	check the box		line 14 is 331/3	% or more, che	eck this box
b	33%% support test—2007. If the organi box and stop here. The organization qua						, check this
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "forganization meets the "facts-and-circum	acts-and-circui	nstances" test,	check this box	and stop here	. Explain in Part	IV how the
b	10%-facts-and-circumstances test – 2007 more, and if the organization meets the "facts-and-circumstant"	acts-and-circun	nstances" test, e	check this box	and stop here .	Explain in Part	IV how the
18	Private foundation If the organization did	I not chack a be	v on line 12 16	a 16h 17a ari	17h check this	hav and see ins	tructions >

	dule A (Form 990 or 990-EZ) 2008						Page 3
	Support Schedule for Orga (Complete only if you checke				ı)(2) 		
Sec	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
3	organization's tax-exempt purpose						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	<u> </u>	 			 	
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
D	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	, 10	7. 7				, ta,
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,	ļ	GR C	1.			
14	and 12.)		on's first, seco	nd, third, fourt	-		ction 501(c)(3)
Sec	organization, check this box and stop			· · · · ·		<u> </u>	, , , P L
15	Public support percentage for 2008 (lin			ne 13 column	(f))	15	%
16	Public support percentage from 2007 \$	Schedule A, P	art IV-A, line 2			16	%
Sec	tion D. Computation of Investmen	nt Income P	ercentage				
17	Investment income percentage for 200				olumn (f)) .	17	%
18	Investment income percentage from 20					18	%
19a	33% % support tests – 2008. If the organism not more than 33% %, check this b	ox and stop h	ere. The organ	ization qualıfie:	s as a publicly	supported o	rganization 🕨 🗀
b	33%% support tests—2007. If the organ line 18 is not more than 33%%, check this	nization did not s box and sto p	check a box of here. The orga	n line 14 or line anization qualifie	19a, and line ⁻ s as a publicly	16 is more th supported o	an 33⅓ %, and rganization ► □

	orm 990 or 990-EZ) 20						Page 4
Part IV	Supplemental Part II, line 17	I Information. a or 17b; or P	Complete this art III, line 12.	part to provide Provide any other	e the explanation er additional infor	required by Pa mation. (see ins	rt II, line 10; tructions)
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Schedule A (F	Form 990 or 990-EZ) 2008	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see	Part II, line 10; instructions)
	······	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

	DU TEMPLE OF EASTERN SHORE	52 1742824
_	Organizations Maintaining Donor Advised Funds or Other Similar the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets he funds are the organization's property, subject to the organization's exclusive legal co	
6	Did the organization inform all grantees, donors, and donor advisors in writing that g used only for charitable purposes and not for the benefit of the donor or donor advis impermissible private benefit?	sor or other
Pa	t II Conservation Easements. Complete if the organization answered "Yes"	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		n of an historically important land area
		on of certified historic structure
	☐ Preservation of open space	
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the on the last day of the tax year.	form of a conservation easement
		Held at the End of the Yea
а	Total number of conservation easements	2a
h	Total acreage restricted by conservation easements	1 - 1
c	Number of conservation easements on a certified historic structure included in (a) .	•
d	Number of conservation easements included in (c) acquired after 8/17/06	
3	Number of conservation easements modified, transferred, released, extinguished, or the taxable year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspect enforcement of the conservation easements it holds?	tion, violations, and
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements du	
8	Does each conservation easement reported on line 2(d) above satisfy the requirement 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	ts of section
9	In Part XIV, describe how the organization reports conservation easements in its revel balance sheet, and include, if applicable, the text of the footnote to the organization' the organization's accounting for conservation easements.	enue and expense statement, and
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	Other Similar Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue art, historical treasures, or other similar assets held for public exhibition, education, or r provide, in Part XIV, the text of the footnote to its financial statements that describes	esearch in furtherance of public service
b	If the organization elected, as permitted under SFAS 116, to report in its revenue start historical treasures, or other similar assets held for public exhibition, education, or reprovide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1	search in furtherance of public service
2	If the organization received or held works of art, historical treasures, or other similar following amounts required to be reported under SFAS 116 relating to these items:	
a b	Revenues included in Form 990, Part VIII, line 1	▶ \$

Page	. :
Page	, ,

Schedule	\Box	/Earm	OOO)	2002
Scheaule	u	(Form	990)	2000

Par	t III Organizations Maintain	ing Collections	of Art, Histori	cal Treasures	, or Other Similar A	ssets (continued)
3	Using the organization's accession items (check all that apply):	and other records	s, check any o	f the following	that are a significant u	ise of its collection
а	Public exhibition		d 🔲	Loan or excha	ange programs	
b	Scholarly research		e 📙	Other	·	
С	Preservation for future general	tions				
4	Provide a description of the organize Part XIV.	ation's collections	s and explain h	ow they further	the organization's exe	empt purpose in
5	During the year, did the organization assets to be sold to raise funds rathe	r than to be mainta	ained as part of	the organization	's collection?	Yes No
Pai	Trust, Escrow and Cust Part IV, line 9, or reported				n answered "Yes" to	Form 990,
	Is the organization an agent, truster included on Form 990, Part X?				ons or other assets no	ot Yes No
b	If "Yes," explain the arrangement in	Part XIV and cor	mplete the follo	wing table:	ſ	
						mount
C	Beginning balance				. 1c	
d	Additions during the year				. 1d	
е	Distributions during the year .				. <u>1e</u>	
f	Ending balance				. 1f	
2a b	Did the organization include an am- If "Yes," explain the arrangement in	n Part XIV.	· · · · · · · · · · · · · · · · · · ·			☐ Yes ☐ No
Pai	t V Endowment Funds. Co			1		
		(a) Current year	(b) Prior year	(c) Two years	back (d) Three years back	(e) Four years back
1a	Beginning of year balance					
b	Contributions					
С	Investment earnings or losses .					-
d	Grants or scholarships					
е	Other expenditures for facilities and programs					
f g	Administrative expenses End of year balance					
2	Provide the estimated percentage of	of the year end ba	lance held as:			
а	Board designated or quasi-endown					
b	Permanent endowment ▶	%				
C	Term endowment ▶ %	6				
3a						
	() alakada mambada					3a(i)
	(ii) related organizations					3a(ii)
b	If "Yes" to 3a(II), are the related org	anizations listed a	is required on :	Schedule R?		3b
4	Describe in Part XIV the intended u					
Pai	t VI Investments – Land, Bu	ıildings, and Eq	uipment. See	e Form 990, Pa	art X, line 10.	
	Description of investment	(a) Cost or ot (investm		Cost or other pasis (other)	(c) Depreciation	(d) Book value
1a	Land		27302			27302
b	Buildings		674984		331788	343196
С	Leasehold improvements					
d	Equipment		3701		370	3331
	Other		1200		85	1115
Tota	I. Add lines 1a-1e. (Column (d) should e	equal Form 990, Pa	rt X, column (B),	, line 10(c).) .	<u> </u>	374944

Part VII Investments—Other Securities	s. See Form 990, Part X,	line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
			
Table (Oakser (A) should assel Feet 2000 Part V and (D) (as 40)			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)	1 0 F 000 D- + V	h 10	
Part VIII Investments—Program Relate		, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year ma	
			<u></u> .
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Pa	rt X line 15		
Other Assets: occ Form 550; Fa	(a) Description	· · · · · ·	(b) Book value
	(4)		\-\(\frac{1}{2}\)
	·		
			<u>.</u>
Total. (Column (b) should equal Form 990, Part X, co.		<u> </u>	
Part X Other Liabilities. See Form 990,	Part X, line 25.		
(a) Description of liability	(b) Amount		
Federal income taxes			
		_	
		-	
		\dashv	
		-	
		-	
Tatal (Calumn (b) about descriptions 000 Descriptions		_	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25) ▶	L		-

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Sche	ule D (Form 990) 2008		Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	s _	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	121176
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	137123
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-15947
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4–8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-15947
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	121176
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	4	
b	Donated services and use of facilities	4	
C	Recoveries of prior year grants	4	
d	Other (Describe in Part XIV)	<u>-</u>	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	4	
b	Other (Describe in Part XIV)		
_	Add lines 4a and 4b	40	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es p	137123
1	Total expenses and losses per audited financial statements	- <u>'</u>	137 123
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	┨	
b	Prior year adjustments	-	
С	Losses reported our rount 500, rate 1x, mile 20	4	
d	Other (Besonde in Fatt XIV)	26	137123
е	Add lines 2a through 2d	3	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	-	
b	Other (Describe in Part XIV)	1-	0
	Add lines 4a and 4b	5	
5 Dav	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	1 3	15/125
			D. a N. P 45
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar	ıa 4;	Part IV, lines 15
ariu	2b; Part V, line 4; Part X; Part Xi, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.		
- -			
		- -	

Schedule D (Fon		Page 5
Part XIV	Supplemental Information (continued)	
		-
		·
		· • • · · · · · ·
		
		
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HEBRON SAVINGS BANK 101 NORTH MAIN P.O. BOX 59 HEBRON, MD 21830 410-749-1185

Payer's Fed I.D. No.

52-0348540 OMB No.

OMB No. 1545-0112 Interest Income Form 1099-INT Copy B For Recipient For year 2008

HTES INC P O BOX 17 SALISBURY MD 21803 Recipient's Tax I.D. No. 52-1742824

Account Information Income ** ** 240272501 DDA 896.29	**
BOX 1 Interest Income	Treas. obligations
This is important tax information and is Internal Revenue Service. If you are rea negligence penalty or other sanction muthis income is taxable and the IRS determined the reported.	equired to file a return, may be imposed on you if

(Keep for your records.)

STATEMENT 1- FORM 990, PART VIII , LINE 7D - SALE OF ASSETS OTHER THAN INVENTORY

DATE DATE COST & GAIN/ SALE PRICE EXPENSE HOW RECD WHOM SOLD ACQUIRED SOLD (LOSS) DESCRIPTION 62,965 66,387 (3,422)**Publicly Traded Securities** 62,965 66,387 (3,422)

Form 4562

Department of the Treasury Internal Revenue Service (99

Depreciation and Amortization(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172
2008
Attachment

Attachment Sequence No 67

Name(s) shown on return

Business or activity to which this form relates

Identifying number

HIN	DU TEMPLE OF EAS	STERN SHOR	E Indire	ct Depreciation	on			52-1/42824
Par			ertain Property Usted property, com			u complete Par	t 1.	
1	Maximum amount. S	See the instruc	tions for a higher limi	for certain bus	sinesses.		1	\$250,000
2			y placed in service (s			2		
3	Threshold cost of s					3	\$800,000	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0							
5	Dollar limitation for separately, see inst		ract line 4 from line 1				5	
	(a)	Description of pro		(b) Cost (busines	s use only)	(c) Elected cos	t	
6								
	_							
7	Listed property. Ent	ter the amoun	t from line 29		7			
8			property. Add amou			and 7	8	
9			naller of line 5 or line				9	
10			n from line 13 of you				10	
11			maller of business incor				11	
12			Add lines 9 and 10, t				12	
13			2009. Add lines 9 and					
Note			w for listed property					
Par	t II Special Dep	preciation All	lowance and Other	Depreciation	n (Do <u>no</u> t	tinclude listed pi	roper	ty.) (See instructions.)
14	Special depreciation during the tax year		r qualified property (o			placed in service	14	
15	Property subject to	section 168(f)	(1) election				15	
16	Other depreciation	(including ACF	RS)				16	
Par	t III MACRS D	epreciation	(Do not include lis	ted property.) (See ins	structions.)		
				Section A				
17 18 	If you are electing to general asset accou	to group any a unts, check he	aced in service in tax assets placed in servere	rice during the	tax year	into one or more ▶		16365
	Section B—		d in Service During	1	r Using t	ne General Depr	eciat	ion System
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)		(e) Conve	ntion (f) Metho	d	(g) Depreciation deduction
19a	3-year property							
<u> b</u>	5-year property		3701	5.0	HY	S/L_		370
c	7-year property		1200	7.0	HY	S/L		85
	10-year property							
	15-year property	ļ			-			
)			-	 			
	25-year property			25 yrs.	1 111	5/L	-	
h	Residential rental			27.5 yrs.	MM			
	property		25704	27.5 yrs.	MM			331
ì	Nonresidential real		25794	39 yrs	MM MM			331
	property	Di	in Comice During (MOO Toy Your			roci	ation System
		Issets Placed	in Service During 2	UVO TAX TEAT	Using in		JI ECI	ation System
	Class life		_	12		5/L 5/L		
	12-year		_	12 yrs.	ММ			
	40-year	(Coo instructi	ions)	40 yrs.	1 1/1/1/1	J 5/L		<u> </u>
		(See instructi					21	<u> </u>
21	Listed property. En	ter amount fro	m line 28 , , ,					
22	Enter here and on the	ne appropriate	lines 14 through 17, lines of your return. F	artnerships and	IS corpor	ations—see instr.	22	17151
23 			ced in service during ributable to section 2		ear, 23			

Form **8868**

(Rev April 2008)

Department of the Treasury Internal Revenue Service Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal Revenue	Service	File a separate application for each return.						
• If you are Do not comp	filing for an Addition Diete Part II unless	atic 3-Month Extension, complete only Part I and check this bound (Not Automatic) 3-Month Extension, complete only Part II you have already been granted an automatic 3-month extension on a	(on page 2 previously fi	of this form).				
Part I	Automatic 3-Mo	nth Extension of Time. Only submit original (no copies need	eded).					
Part I only .		orm 990-T and requesting an automatic 6-month extension—chec		▶ □				
time to file ii	ncome tax returns.	g 1120-C filers), partnerships, REMICs, and trusts must use Form						
one of the relectronically returns, or a	eturns noted below if (1) you want the composite or conso	ally, you can electronically file Form 8868 if you want a 3-month at (6 months for a corporation required to file Form 990-T). Howe additional (not automatic) 3-month extension or (2) you file Form didated Form 990-T. Instead, you must submit the fully completed a ectronic filing of this form, visit www.irs.gov/efile and click on e-file	ever, you ca ns 990-BL, (Ind signed p	annot file Form 8868 6069, or 8870, group age 2 (Part II) of Form				
Type or print	Name of Exempt O	rganization	Employer	identification number				
File by the due date for filing your	Number, street, and room or suite no. If a PO box, see instructions							
return See instructions	City, town or post of	office, state, and ZIP code For a foreign address, see instructions						
Check type	of return to be file	ed (file a separate application for each return):						
Form 99		Form 990-T (corporation)	П	Form 4720				
☐ Form 99		Form 990-T (sec. 401(a) or 408(a) trust)		Form 5227				
☐ Form 99		Form 990-T (trust other than above)		Form 6069				
☐ Form 99		Form 1041-A		Form 8870				
☐ FOIIII 99	J-PF	☐ FOIIII 1041-A		1 01111 0070				
Telephone If the orga	No. ▶ () nization does not h	FAX No. ► () lave an office or place of business in the United States, check this enter the organization's four digit Group Exemption Number (GEN)	s box .	 ▶ □				
for the whole	group, check this	box ▶ □ . If it is for part of the group, check this box of all members the extension will cover.	▶	and attach				
until for the	organizatıon's retur calendar year 20		n named abo	ove. The extension is				
2 If this t	ax year is for less t	han 12 months, check reason: Initial return Final return	☐ Change	in accounting period				
	• •	orm 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta edits. See instructions.	ax, 3 a	\$				
		rm 990-PF or 990-T, enter any refundable credits and estimated tany prior year overpayment allowed as a credit.	ax 3b	\$				
c Balanc deposi System	e Due. Subtract line with FTD coupon). See instructions.	e 3b from line 3a. Include your payment with this form, or, if require or, if required, by using EFTPS (Electronic Federal Tax Payme	ent 3c	\$				
	ou are going to ma instructions.	ke an electronic fund withdrawal with this Form 8868, see Form 8	453-EO and	Form 8879-EO				

Pa	ge	2
>	Į]

Form 8868 (Rev 4-2008)

		filing for an Addi									∠ I
		omplete Part II if y							eviously filed	Form 8868.	
		filing for an Auto Additional (No							nal and and	conv	—
Par			•) 3-Wonth Ex	tension or	Time. 10	u III			dentification num	her
Type		Name of Exempt	•	CHODE					52 :	1742824	ibei
print		HINDU TEMPL		uite no If a PO k	nov see instru	ctions			For IRS use		
File by extend		125 PARKER				CHOIS		1	roi ino use	Offiny	
	ate for			or PO Box 17		ann innterior	1000	 			
retuin	See	•		d ZIP code For a fo	oreign address,	see mstruct	10115				
instruc		SALISBURY,		anarata annica	tion for each	roturn)					
	orm 990	of return to be	Tiled (File a S		mon for each			orm 1041-A		Form 6069	
	orm 990	_		-гг -Т (sec. 401(a) с	or 400/0) true		_	Form 4720		Form 8870	
=	orm 99			-T (sec. 401(a) c -T (trust other tl		y	=	Form 5227	Ч	1011110070	
		ot complete Part	_			omatic 2			on a proviou	cly filed Form 8	968
					anteu an aut	ornatic 3				siy illed Form o	000.
• The	e books	are in the care of	of MAINAL	. WANDAN		· ,					
		No. ► (410	- <i>-</i> ′	34350							
		nization does not									Ш
		r a Group Return									
		e group, check the				the grou	p, cr	neck this box	▶ ∟	j and attach a	
list w	vith the	names and EINs	of all member	ers the extensio	on is for.						
						Marram	L 4	4 E	00		
4	I reque	st an additional 3	3-month exte	nsion of time u	ntıl	Novem	ber 1	15	, 20 09 .	00	
5	For cal	endar year	$_{\text{-}}$, or other tax	cyear beginning			, 20.	, and endir	ng	, 20.	
5 6	For call	endar year ax vear is for les	₋ , or other tax s than 12 mc	cyear beginning onths, check rea	ason: 🗌 Ini	tıal return	, 20 ₋ .	, and endir Final return	ng Change	in accounting pe	 eriod
5	For call If this t State ii	endar year ax year is for les n detail why you	 , or other tax s than 12 mc need the ext 	year beginning onths, check rea ension The und	ason: 🗌 Ini dersigned w	tıal return as appoir	, 20. ted	, and endir Final return Treasurer du	ng Change ring the yea	in accounting por.	eriod
5 6	For call If this t State ii Most c	endar year ax year is for les n detail why you of the details are	or other tax s than 12 mo need the externed ready. Certa	cyear beginning onths, check rea ension The und ain clarification	ason: Ini dersigned was and docur	tial return as appoir nents are	, 20. nted nee	, and endir Final return Treasurer du ded from the	ng Change ring the yea Ex Treasur	in accounting per r. er and Ex comr	eriod
5 6	For call If this t State ii Most c	endar year ax year is for les n detail why you	or other tax s than 12 mo need the externed ready. Certa	cyear beginning onths, check rea ension The und ain clarification	ason: Ini dersigned was and docur	tial return as appoir nents are	, 20. nted nee	, and endir Final return Treasurer du ded from the	ng Change ring the yea Ex Treasur	in accounting per r. er and Ex comr	eriod
5 6 7	For call If this t State ii Most of memb	endar yearax year is for les on detail why you of the details are ers who are curi	, or other tax s than 12 mc need the ext ready. Certa rently travell	year beginning onths, check rea ension The und ain clarification ing due to sick	ason: Inidersigned was and documents in the	tial return as appoir ments are family. Th	, 20 nted nee	, and endir Final return Treasurer du ided from the turn is expec	Change ring the yea	in accounting per r. er and Ex comr	eriod
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